

Minutes of the Health & Human Services Committee and Board

Thursday, November 13, 2014

Chair Vitale and Vice Chair Paulson called the meeting to order at 1:00 p.m.

Committee Members Present: Supervisors Duane Paulson, Janel Brandtjen, Christine Howard, Tom Schellinger, and Jeremy Walz. Brandtjen left the meeting at 2:43 p.m. **Absent:** Chair Gilbert Yerke and Bill Zaborowski.

Board Members Present: Citizen Members Joe Vitale, Mike O'Brien, Sarah Justin, and Lori Cronin, and Supervisors Duane Paulson, Christine Howard, and Janel Brandtjen. Brandtjen left the meeting at 2:43 p.m. **Absent:** Citizen Members Dr. Steven Kulick and Mary Lodes, and Supervisor Bill Zaborowski.

Also Present: Legislative Policy Advisor Sarah Spaeth, Health & Human Services Director Antwayne Robertson, Health & Human Services Deputy Director Laura Kleber, Clinical Services Manager Joan Sternweis, Joe Muchka and Bernie Mangers of the Addiction Resource Council, Mental Health Center Administrator Jeff Lewis, Outpatient Services Coordinator Dr. Gordon Owley, Mental Health Center Nursing Director Janet Koller, Mental Health Center Nursing Supervisor Crystal Boyd, Outpatient CST Coordinator Laurie Kohler, Outpatient Clinical Therapist Jennifer Wrucke; Human Services Supervisors Danielle Birdeau, Brad Haas, and John Kettler; and Senior Financial Analyst Steve Trimborn. Recorded by Mary Pedersen, County Board Office.

Committee Agenda Items

Approve Minutes of 10-9-14 and 10-10-14

MOTION: Brandtjen moved, second by Howard to approve the minutes of October 9 and 10. Motion carried 5-0.

Schedule Next Meeting Date

- December 4

Executive Committee Report

Spaeth noted the Executive Committee, at their last meeting, approved some ordinances which have since been considered by the full County Board.

Board Agenda Items

Approve Minutes of 7-16-14, 7-17-14, 8-28-14 and 9-11-14

MOTION: Brandtjen moved, second by Cronin to approve the minutes of July 16. Motion carried 7-0.

MOTION: Paulson moved, second by Cronin to approve the minutes of July 17. Motion carried 7-0.

MOTION: Howard moved, second by Justin to approve the minutes of August 28. Motion carried 7-0.

MOTION: O'Brien moved, second by Howard to approve the minutes of September 11. Motion carried 7-0.

Advisory Committee Reports

Cronin said Public Health Manager Nancy Healy-Haney reported to the Public Health Advisory Committee that the vaccination outreach clinics have been discontinued due to low turnout resulting from new guidelines of the Affordable Care Act. However, Public Health will extend hours every Tuesday for services including vaccinations. Also, Public Health staff are working proactively to prepare for the 140 Review and obtain personal protective equipment in the event of a local Ebola exposure.

Vitale advised the Mental Health Advisory Committee received an educational presentation on emergency detentions. In 2013 there were 1,000 emergency detentions in Waukesha County.

Vitale said discussions at the Child & Family Services Advisory Committee meeting centered on alternative schools and the expelled students program with the basic focus being credit recovery for these kids to aid in their graduation. Other alternative programs discussed were the student age parenting program, the Laurer Program, and a student credit program at Norris Adolescent Center. He noted 133 students currently attend the day program at Norris.

At the Community Health Improvement Plan (CHIP) Steering Committee meeting, Vitale said the involved agencies reported on their particular roles, objectives, and progress on meeting their objectives. Vitale felt the results of CHIP have far exceeded expectations. A "wrap-up" meeting will be held in June 2015 and a final report will be available in November 2015. In early 2016, a new CHIP Steering Committee will begin and will meet through 2020.

Vitale gave a report on the Heroin and Other Illicit Drug Talk Force meeting. The five "pillars" are prevention, harm reduction, treatment, workplace, and law enforcement and the facilitators of each are working on an action plan. A mini task force will meet next week to discuss next steps.

O'Brien advised the AODA Advisory Committee heard a presentation by an overdose prevention specialist on the five pillars.

Announcements

Vitale asked for a volunteer from the Health & Human Services (H&HS) Board to fill Zaborowski's seat on the Aging & Disabilities Resource Center (ADRC) Advisory Committee.

Vitale announced the County Board approved the 2015 County budget. Also, County Executive Dan Vrakas announced he will not seek re-election.

Items for Discussion and Consideration

Overview of Department of Health Services (DHS) 62 Assessment of Drivers with Alcohol or Controlled Substance Problems (combined)

Muchka, Mangers, Sternweis and Kettler were present to discuss DHS 62 of the Wisconsin Administrative Code, Department of Health Services. Sternweis said this item was placed on the agenda because State rules dictate how intoxicated drivers are assessed. The H&HS Board appoints an agency to provide those initial assessments. The Addiction Resource Council is the assessment

agency for Waukesha County and has been for many years. One responsibility of the assessment agency is to designate a coordinator to ensure quality services, among other duties. Part of the process today is to appoint a new individual to perform that role which is typically done by the individual who supervises substance abuse services.

Muchka and Mangers explained Chapter 62, intoxicated driver assessments (screenings), and the subsequent treatment plans in detail. Muchka indicated Chapter 62 establishes standards for assessment and driver safety plans for those who operate a motor vehicle while under the influence of intoxicants or other drugs and who voluntarily, or by court order, or by order of the Wisconsin Department of Transportation undergo an intoxicated driver assessment and complete a driver safety plan. The designated coordinator must complete driver assessment training and is knowledgeable in substance psychopharmacology, addiction and addiction treatment, and sentencing related to violations. The driver safety plan is an individualized plan that specifies recommended treatment, education and/or other services directed toward reducing a client's inclination to drive under the influence of alcohol or other controlled substances. The Interagency Program for the Intoxicated Driver (IPID) Committee is appointed by the H&HS Board to guide in the development and implementation of the Intoxicated Driver Program.

To answer Brandtjen's question, the intoxicated driver assessment costs \$250 per client, a fee determined by the H&HS Board. Mangers noted if a client does not complete the treatment plan they are deemed noncompliant with the Department of Transportation and their driving privileges are suspended until they are compliant.

Mangers gave history and an overview of Wisconsin's drunk driving laws. Muchka advised there are approximately 1,000 OWIs in Waukesha County each year which has declined from previous years, of which he gave statistics. About one-third of first time OWI offenders will eventually reoffend and about one-third of second OWI offenders will receive a third OWI, a relatively high recidivism rate in Waukesha County. Also, a first offense drunk driver has driven drunk, on average, 81 times before being caught.

Appointment of Designated Coordinator Under DHS 62 Rule (board)

Kettler said he has been employed with Waukesha County for 3.5 years doing substance abuse counseling and mental health therapy in the outpatient clinic. He began working in substance abuse services in 1992 and has also worked with child protective services, crisis and school counseling, mental health services, and managed a methadone clinic. He is a licensed psychotherapist, clinical substance abuse counselor, and independent clinical supervisor.

MOTION: Brandtjen moved, second by O'Brien to appoint John Kettler as the designated coordinator as specified in DHS 62. Motion carried 7-0.

Educational Overview of the Clinical Services Division (combined)

Sternweis and staff gave an educational overview of the Clinical Services Division which includes the Mental Health Clinic, Mental Health Center, and Clinical Services. The service units within those three divisions include the following programs.

Owley said Outpatient Clinic Services provides certified mental health treatment to County residents of all ages, regardless of ability to pay or health insurance status. These include psychotherapy services (individual and group), psychiatric services (medication management), court related services (monitors compliance of committed/stipulated clients and performs psychological

evaluations), and mobile crisis intervention (suicide assessment, trauma debriefing, etc.) The total monthly caseload (April, 2014) was 2,748 and included individual and group appointments, and injectable medication administration.

Kettler indicated Substance Abuse Services provides comprehensive evidence-based treatment to individuals struggling with substance abuse and co-occurring disorders to adults and adolescents. Treatment goals are specific to the individual and often include abstinence, housing, transportation, legal, employment, nutrition, family dynamics, etc. Services are based on cognitive-behavioral therapies, contingency management, community reinforcement, family involvement, support building, and community collaboration. This includes individual counseling, primary group treatment, the intensive outpatient program, and aftercare. This also includes treatment for heroin addiction.

Kohler discussed the Coordinated Service Team Initiative (CST) which collaborates with families, schools, and community partners to provide a coordinated system of care to support the wellbeing of children and adolescents with significant mental health and behavioral issues, and their families. Goals include reducing inpatient admissions, improving the quality of life in the community and promoting independence and the principles of recovery. Primary services include case management, psychiatric services, psychological services, psychosocial education, advocacy, medication management, crisis services, etc.

Brandtjen left the meeting at 2:43 p.m.

Haas discussed the Community Support Program (CSP) which provides treatment, rehabilitation, outreach, and supports services to individuals diagnosed with severe and persistent mental illness. Goals include reducing inpatient admissions, improving quality of life in the community and promoting the independence and the principles of recovery. Services include case management, psychiatric and psychological services, psycho-social education, financial management, vocational assessment, medication management and monitoring, family conferences, crisis services, etc. Ancillary services include the Consumer Recovery Committee, Spring City Corner Clubhouse, Friendships Unlimited, Certified Peer Specialists, Barstow House, etc.

Birdeau discussed the Treatment and Support Services Unit (TSSU) which is a strength-based and person-centered treatment program for individuals with mental health and substance abuse concerns. TSSU works with individuals who require more than outpatient services. These include psychological rehabilitation, assessment and service facilitation, therapy, individual and/or family, psycho-education, residential rehabilitative treatment, employment support, case management, civil commitment monitoring, adult mental health day treatment, outpatient psychiatry and injection clinic, etc.

Lewis discussed Inpatient Services as a free-standing certified psychiatric hospital with two separate 14-bed units. The facility provides psychiatric stabilization of significant symptoms of mental illness or coexisting mental health and chemical dependency issues for adults 18 and older. Admissions may be voluntary or involuntary and a psychiatric assessment is made within 24 hours. The course of treatment includes assessment, treatment plan and discharge planning. Active treatment plans can include medication administration, individual psychotherapy, group counseling, coping strategies, family education, special monitoring for detox, etc.

MOTION: Schellinger moved, second by Howard to adjourn the committee meeting at 3:16 p.m.
Motion carried 4-0.

Approval of Health & Human Services Board By-laws (board)

Vitale asked if there were any questions on the draft of the revised by-laws. There were none.

MOTION: Cronin moved, second by Paulson to approve the revised H&HS Board by-laws dated August 21, 2014. Motion carried 6-0.

MOTION: Howard moved, second by Cronin to adjourn the board meeting at 3:17 p.m. Motion carried 6-0.

Respectfully submitted,

Janel Brandtjen
Secretary